

City of Ocala

Recreation & Parks Department

Facility Event Application



PERSONAL INFORMATION

Contact Person: Phone Number:

Business Name:

Mailing Address:

Date of Birth: Driver License #:

E-mail Address:

Check those applicable: City Resident Non-Resident Non-Profit

FACILITY REQUEST

Facility Requested Mary Sue Rich Community Center (Capacity: Varies) Banquet 1
Banquet 2
Banquet 3

E.D. Croskey Center Gymnasium
(Capacity: Banquet 327, Bleachers Out 500, Bleachers In 894)

Jervey Gantt Aquatic Fun Center (Capacity: Pool 120, Deck 510)

Hampton Aquatic Fun Center (Capacity: Pool 105, Deck 462)

Type of Function: *Is this a youth or teen birthday party?*

Name of Event:

Date(s) Requested: Maximum Attendance:

Set Up Begins (Time): My Event Begins (Time):

My Event Ends (Time): Cleanup/Breakdown complete (Time):

Description of Activities:

Is this by invitation only, a private event and/or open to the public? If public please provide social media.

Invitation Only

Posted on Social Media?

Public Event

Platform(s) _____

User Name _____

Will you have music? Live Band or DJ Name of Band or DJ:
 Stereo Equipment
 None

Will you sell tickets? Check which apply. In advance ONLY Ticket Price (In Advance)
 In advance & at the door
 At the door ONLY Ticket Price (At the Door)
 I will NOT sell tickets to this event

Alcohol: Which applies? Alcohol will be served
There will be NO alcohol at this event

Will anyone under age of 18 be in attendance? If yes, what ages? 0-5 6-11 12-15 16-17
Will you be using the kitchen? Yes No Not Applicable

Do you anticipate a need to use any park space exterior to the facility (other than for routine parking)? Yes No
If Yes, describe:

After the Recreation and Parks Department receives this form and based upon room availability, a determination will be made whether a rental agreement, special event permit, MOU or lease is needed. The appropriate staff will contact the above applicant to complete the necessary paperwork if approved. Until a signed agreement or permit has been executed by both parties, NO RESERVATIONS ARE CONFIRMED.

By signing this application I acknowledge that I have read and understand the Rental Facility Rules and Standards for Use and Permitting and agree to abide by all terms and conditions outlined therein. If a permit is issued, I agree to indemnify the City and its elected officials, employees and volunteers against, and hold City and its elected officials employees and volunteers harmless from, all damages, claims, losses, costs, and expenses, including attorney fees, which City or its elected officials, employees, or volunteers may sustain, or which may be asserted against City or its elected officials, employees or volunteers, arising out of the Permit or the condition of the facility, or as a result of Permittee's possession of the facility, including, without limitation, harm or personal injury to the Permittee or third persons during Permittee's possession of the facility.

Applicant Signature Date

FOR OFFICE USE ONLY

Division Head (or Designee) Date

Recommend Process As: Rental Agreement
 Special Event Permit
 MOU/Lease

Request Approval/Denial: Approved
 Approved with revisions
 Denied

Comments: